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NFORMATION REQUEST					65
OLLOW INSTRUCTIONS (front and back) CA	AVELOUIS	FIGERCOT # J L, 6	2005 J	miso bh pa	21
Caroline DeVries 219-987-	41412005	199999 8 4 O		in I TYW	N.
BORETURN TO: (Name and Address)				in A.	
DeMotte State Bank Caroline DeVries P.O. Box 400 DeMotte, IN 46310	1				
<u></u>	i				
10DEBTOR NAME to be searched - Insert only	one debtor name (12 or 1b)	THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY			
1a@RGANIZATION'S NAME	one deplot hame (ta or 10)	- 40 HOL SPRIENISTS OF COMPIN	o hames		
OR A BEAT OFF MUSIC		SIDSTNIASAE		MIDDLE MARKE	ettenv
TRUNDIVIDUACS LAST NAME		FIRSTNAME		MIDDLE NAME	SUFFIX
Select one of the following two options:	O (Optional) ALL (Check this b O (Optional)	ox to request a response t			_
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Record Number	Date Rec rd File	d (if required) Type of I	Record and Additiona	l Identifying Informa	tion (if required)
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30ADDITIONAL SERVICES:					
MEADOWS, MICHAEL					
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			Luck	1-19-0	7.5
40DELIVERY INSTRUCTIONS (request will be o	ompleted and mailed to the	address shown in item B unle			
4aC Pick Up		,			
4bC Other Specify desired method here (if available)	lo from this office); provide del	han information (afAndalivery se	nice's name, addressee's ac	rount # with delivery service	addressee's phone #. etc()